

APPLICATION DATA SHEET

Application Information

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|----------------------------------|---------------------------------|
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| CD-ROM or CD-R?:: | None |
| Title:: | A METHOD FOR VENTILATING A SEAT |
| Attorney Docket Number:: | 1139-026 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawings Figure:: | 1 |
| Total Drawing Sheets:: | 5 |
| Small Entity?:: | No |
| Petition included?:: | No |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

| | |
|---|----------------------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Pakistan |
| Status:: | Full Capacity |
| Given Name:: | Syed |
| Middle Name:: | Rafat |
| Family Name:: | Iqbal |
| Name Suffix:: | |
| City of Residence:: | Tecumseh |
| State or Province of Residence:: | Ontario |
| Country of Residence:: | Canada |
| Street of mailing address:: | 12875 St. Gregory's Rd. Tecumseh |
| City of mailing address:: | Tecumseh |
| State or Province of mailing address:: | Ontario |
| Postal or Zip Code of mailing address:: | N8N 5A4 |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canadian
Status:: Full Capacity
Given Name:: Corina
Middle Name:: Simona
Family Name:: Alionte
Name Suffix::
City of Residence:: Windsor
State or Province of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 623 Grand Marais Road East
City of mailing address:: Windsor
State or Province of
mailing address:: Ontario
Postal or Zip Code of
mailing address:: N8X 3H6

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canadian
Status:: Full Capacity
Given Name:: Goran
Middle Name::
Family Name:: Bajic
Name Suffix::
City of Residence:: Belle River
State or Province of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 326 Piroli Cr.
City of mailing address:: Belle River
State or Province of
mailing address:: Ontario

Postal or Zip Code of
mailing address:: N0R 1A0

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canadian
Status:: Full Capacity
Given Name:: Shaun
Middle Name:: Calvin
Family Name:: Howick
Name Suffix::
City of Residence:: Windsor
State or Province of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 686 Argyle Road, Apt. 3C
City of mailing address:: Windsor
State or Province of
mailing address:: Ontario
Postal or Zip Code of
mailing address:: N9J 1C3

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canadian
Status:: Full Capacity
Given Name:: Zoran
Middle Name::
Family Name:: Panic
Name Suffix::
City of Residence:: Windsor
State or Province of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 766 Sandison St.

City of mailing address:: Windsor
State or Province of
mailing address:: Ontario
Postal or Zip Code of
mailing address:: N9E 4T3

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canadian
Status:: Full Capacity
Given Name:: Valerija
Middle Name::
Family Name:: Drobnjakovic
Name Suffix::
City of Residence:: LaSalle
State or Province of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 1240 Carriage Lane
City of mailing address:: LaSalle
State or Province of
mailing address:: Ontario
Postal or Zip Code of
mailing address:: N9H 1Z8

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Marinko
Middle Name::
Family Name:: Lazanja
Name Suffix::
City of Residence:: Windsor

State or Province of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 1012 Lena Avenue
City of mailing address:: Windsor
State or Province of
mailing address:: Ontario
Postal or Zip Code of
mailing address:: N8Y 4A2

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: German
Status:: Full Capacity
Given Name:: Simone
Middle Name::
Family Name:: Köhler
Name Suffix::
City of Residence:: Ostfildern
State or Province of Residence::
Country of Residence:: Germany
Street of mailing address:: Im Flieger 1
City of mailing address:: Ostfildern
State or Province of
mailing address:: Germany
Postal or Zip Code of
mailing address:: D-73760

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: German
Status:: Full Capacity
Given Name:: Peter
Middle Name::

Family Name:: Nägele
Name Suffix::
City of Residence:: Aichach
State or Province of Residence::
Country of Residence:: Germany
Street of mailing address:: Mozartstr. 24
City of mailing address:: Aichach
State or Province of
mailing address:: Germany
Postal or Zip Code of
mailing address:: 86551

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Stefan
Middle Name::
Family Name:: Stoewe
Name Suffix::
City of Residence:: Mering
State or Province of Residence::
Country of Residence:: Germany
Street of mailing address:: Schillerstrasse 6
City of mailing address:: Mering
State or Province of
mailing address:: Germany
Postal or Zip Code of
mailing address:: D-86415

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::

Status:: Full Capacity
Given Name:: Boris
Middle Name::
Family Name:: Zlotin
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address:: 25505 W. 12 Mile Road, Suite 5500
City of mailing address:: Southfield
State or Province of
mailing address:: MI
Postal or Zip Code of
mailing address:: 48034-8302

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Piter
Middle Name::
Family Name:: Ulan
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address:: 25505 W. 12 Mile Raod, Suite 5500
City of mailing address:: Southfield
State or Province of
mailing address:: MI
Postal or Zip Code of
mailing address:: 48034-8302

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Vladimir
Middle Name::
Family Name:: Gerasimov
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address:: 25505 W. 12 Mile Road, Suite 5500
City of mailing address:: Southfield
State or Province of
mailing address:: MI
Postal or Zip Code of
mailing address:: 48034-8302

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Vladimir
Middle Name::
Family Name:: Proseanik
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address:: 25505 W. 12 Mile Road, Suite 5500
City of mailing address:: Southfield
State or Province of
mailing address:: MI

Postal or Zip Code of
mailing address:: 48034-8302

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Alla
Middle Name::
Family Name:: Zusman
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address:: 25505 W. 12 Mile Road, Suite 5500
City of mailing address:: Southfield
State or Province of
mailing address:: MI
Postal or Zip Code of
mailing address:: 48034-8302

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Kirill
Middle Name::
Family Name:: Sklobovskiy
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address:: 25505 W. 12 Mile Road, Suite 5500

City of mailing address:: Southfield
State or Province of
mailing address:: MI
Postal or Zip Code of
mailing address:: 48034-8302

Correspondence Information

Correspondence Customer

Number:: 25215
Name: Christopher J. Voci
Street of mailing address:: 401 S. Old Woodward Ave., Suite 311
City of mailing address:: Birmingham
State or Province of mailing address:: MI
Postal or Zip Code of
mailing address:: 48009
Phone number:: 248-593-9900
Fax Number:: 248-593-0581
E-Mail address:: cvoci@patentco.com

Representative Information

| | |
|---|-------|
| Representative Customer Number:: | 25215 |
|---|-------|

Assignee Information

Assignee name:: W.E.T. Automotive Systems AG